Please type a plue align (+) inside this box

Revised PTO/SB/51S (08-00)

Approved for use through 12/30/2000, OMB 0851-0033 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwark Reduction Act of 1995, no persons are required to respond to a collection of information unless it

contains a valid OMB control number.

FOR REISSUE
PATENT APPLICATION
TO CORRECT "ERRORS"
STATEMENT
(37 CFR 1.175)

	Attu	mey Docker No.
Attorney Docket Num	ber 31238-172689	Ea
First Named Inventor	Nobuo ASANO et al.	74 80
	COMPLETE	St. CE
Application Number	09 / 887,042	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~
Filing Date	June 25, 2001	Technolo 7200
Group Art Unit	2631	4//,
Examiner Name	Don Nguyen Vo	ST CSNIET 26X

## I/We hereby declare that:

Every error in the patent which was corrected in the present relssue application, and which is not covered by the prior oath(s) and/or declaration(s) submitted in this application, arose without any deceptive intention on the part of the applicant.

I/We hereby declare that all statements made herein of my/our own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor	r	A pedition has been filled for this unsigned inventor				
Given Name (first and middle [if any])		Family Name or Sumame				
Nobuo		ASANO				
Inventor's Signature	Myno A	una	D	ate	August 18 2003	
Name of Second Inventor:		A petition has been filled for this unsigned inventor				
Given Name (first and middle [if any])		Family Name or Sumame				
Osama		KATO				
Inventor's Signature	Psamu	Kato	Di	âte	August 18 2003	
Name of Third Inventor:		ventar				
Give Name (first and middle [if any])		Family Name or Sumame				
	1	<u> </u>		_		
Inventor's Signature	. [			Date		
Name of Fourth Inventor:		gned inv	entor/			
Give Name (first and middle [if any])		Family Name or Sumame				
Inventor's Signature				Date		
Additional inventors are being na	med on the supplemental A	dditional Inventor(s) sheet(s) PTO/SB	/02A attached here	eto.		

Burden Hour Statement: This form is astimated to take 0.03 hours to complete. Time will vary depending upon the needs of the Individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

PC Docs No. 473117

[Page 1 of 1]

**BEST AVAILABLE COPY** 

